

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>International Brotherhood of Electrical Workers Local 98 Committee on Political Education</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00162818
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Strassheim Graphic &amp; Design Press Corp</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 04 / 2014</b>
Mailing Address <b>333 N 15th St</b>		Amount 1881.69
City <b>Philadelphia</b>	State <b>PA</b>	Zip Code <b>19102-1034</b>
Purpose of Expenditure Indep Expend: door hangers supporting Brady for Congress		Transaction ID : <b>E650A25C44538459B998</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Rep. Robert A. Brady</b>		Category/Type
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		1881.69

Full Name of Payee <b>Strassheim Graphic &amp; Design Press Corp</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 04 / 2014</b>
Mailing Address <b>333 N 15th St</b>		Amount 2738.14
City <b>Philadelphia</b>	State <b>PA</b>	Zip Code <b>19102-1034</b>
Purpose of Expenditure Indep Expend: door hangers supporting Boyle for Congress		Transaction ID : <b>E48D2CC0C432A4DF79B4</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>Mr. Brendan Boyle</b>		Category/Type
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		4541.64

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4619.83
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	4619.83

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BRIAN BURROWS

[Electronically Filed]

Date

MM / DD / YYYY  
11 / 04 / 2014

Signature